HOW TO DETERMINE THE PRESENCE OF INTESTINAL PARASITES

Darling (Société de Pathologic Exotique, May 10, 1911) describes two simple methods for determinining the presence of intestinal parasites, especially the oxyuris, *Ankylostoma duodenale* and the *Strongylus stercorale.*

The first method consists in mixing a small portion of the feces with sterile water in a Petri dish and incubating at 37 degrees for twenty-four hours.

The second method is based upon the separation of the ova by means of centrifuging. The specimen is shaken vigorously in a test tube with sterilized distilled water, then centrifuged after calcium chloride has been added. The supernatant fluid is then examined for the ova.—(V. A. L., in *La Tribune Med.,* Mch., 1912.)

EXAMINATLON OF SPUTUM FOR TUBERCLE BACILLI

Many methods have been tested by which sputum may be liquified and the bacilli precipitated, and the use of the centrifuge and filter dispensed with. The following are presented by Nemmser and Martos-Lissowska (Deutsch Med. Woch., Sept. 14, 1911; p. 1697);

(1) *Alkaline trypsin digestion.*

To 0.1 cc. of trypsin and 5 cc. of a 0.4% sodium hydrate solution are added 5 cc. of sputum. Shake the mixture with the addition of a few drops of $CHCl_3$ and incubate at 37° C for 24 hours. Then there will be found beneath a clear supernatant liquid, a *compact* deposit, which can be readily removed and stained.*

(2) *Acid trypsin digestion.*

As above; except that 0.4% HCl is substituted for the soda solution, and no $CHCl_3$ need be added.

(3) *Oxidation.*

To 5 cc. of sputum 5-10 drops of perchloric acid—$HClO_4$—and 5 cc. of water are added. This is incubated, and treated as before. Instead of the perchloric acid, 0.5 grm. of potassium chlorate and 5 cc. of 0.4% HCl may be substituted.

*Much's method of sputum staining is very valuable for all suspected cases of phthisis in which no tubercle bacilli are found by the usual methods of examination. This consists of treatment with anilin gentian violet for 48 hours and then with Gram's solution. By this means non-acid fast forms of tubercle bacilli, which fail to retain the dye under Ziehl's process, may be seen. See Roepke, Deutsch Med. Woch., Oct., 1911, p. 1937, or J. R. A. and Med. Corps, Mch., 1912, p. 357.